

Construction Trades Qualifying Board APPLICATION FOR PERSONAL and BUSINESS CERTIFICATION

APPLICATION FEES

BUSINESS APPLICATION FEES	\$ 315.00
ENGINEERING PERSONAL CERTIFICATE	\$ 315.00
BUILDING/BUILDING SPECIALTIES PERSONAL CERTIFICATE	\$ 315.00
MASTER AND INSTALLER	\$ 315.00
JOURNEYMAN AND MAINTENANCEMAN	\$ 240.00
PERSONAL APPLICATION FEES	

MAKE CHECK PAYABLE TO MIAMI-DADE COUNTY

(Business Application not applicable to Journeyman and Maintenance man applicants)

Refunds may be granted <u>only</u> for exam categories under specific circumstances outlined in Section 10-23 of the Code of Miami-Dade County. In those cases where a refund is applicable, there will be a non-refundable processing fee of \$80. Refund requests must be made in writing no later than six months from the exam date. Original receipt must be presented for a refund.

APPLICATION SUBMITTAL

Return this application and all supporting documents by mail to the Miami-Dade County Building Code Compliance Office, Contractor Licensing, 140 W. Flagler Street, Suite 1602, Miami, FL 33130-1563. You may also hand deliver documents to Contractor Licensing located on the 16th floor of the same building. If you have questions, please contact one of the following Contractor Licensing staff at (305) 375-2527.

Dorothy Woon

Joaquin Barros

Shirley Brown

Wilton Pao

Licensing Clerk Licensing Clerk Licensing Clerk Supervisor

*For Engineering categories, return application and all supporting documents to the Public Works Department at 111 NW 1st Street, Suite 1510, Miami, FL 33128. For further information call (305) 375-2705.

FILING DATE

All licensing categories requiring an exam must be reviewed and approved by the Contractor Enforcement Section prior to taking an exam. The completed application along with the supporting documents as required with the fee must be received at least thirty (30) calendar days before the requested scheduled Examination. A notice will be sent to the applicant indicating the date, time and location of the requested examination. This notice will be sent to the applicant at least thirty (30) calendar days prior to the next scheduled exam.

	<u> </u>	OR DEPARTMEN	T USE ONLY		
ee	Process No		Clerk	Date	
s this applica	ation for a late renewal (missed more	than two consecut	ive renewal periods)	of a personal cer	tificate?
Special Exar	m Provisions:		Appli	cant Initials:	Date:
Notes					
·	Rev	iew of PERSONAL	. APPLICATION		
	Approved Re	ejected	Board App	earance Require	ed 🗌
		FOR CTQB US	E ONLY		
	APPR	OVED RE	EJECTED		
Special inst	ructions/comments from CTQB	<u>—</u>			
ı	Зу:		Dat	te:	
•	By:CTQB Member (Signatur	re)	Dat		
	(Print Name)				



1.

Construction Trades Qualifying Board

BUILDING CODE COMPLIANCE OFFICE 140 West Flagler Street, Suite 1602 Miami, FL 33130-1563

SECTION A: to be filled out by individual that are filing for a PERSONAL CERTIFICATION

PLEASE TYPE OR PRINT (must be legible). An answer must be provided for each question. If a question does not apply indicate "N/A". For retakes, complete 1 through 9 only.

Trade and category applying for ______0a____

If exam category, provide exam date _____0b____

PHOTOGRAPH

One recent photo must be attached for non-exam categories.

Two recent photos must be attached for exam categories (Retakes included)

	Phone: Home	1c	Work	1d		Pager or 0	Cellular1e	
	Address	1f			City	1g	State _1h_ Zip Code	e1i
							Date of Birth1I_	
2.	Number of years we	orking in trade applie	ed for:2a	Yrs	s. as a Tra	inee:2b	Yrs. as Journeyma	an:2c
3.	If applying for a MA	STER examination a	and the preregi	uisite is a Mia	ami-Dade (County Journe	yman certification, when c	lid you pass the
		nation?3_				•		,
4.	•				n the cated	gorv vou are n	ow applying for? Yes	1a No 4b
		4c		•	•			· · · · · · · · · · · · · · · · · · ·
5.							- ı category and for which e	xam date?
0.		y defined in whatin be	-			-		Adm date:
6.								of Chapter 10 of
0.							ling by the requirements on unty? Yes <u> 6a </u> No	
7.	Do you hold a certit	ficate/license in any o	of the construc	tion trades is	sued by <u>aı</u>	ny county or st	ate board? Yes _7a	No7b
	If yes, attach copy.		IM	IPORTANT	NOTEL			
								\ 144.0
							include their contractor lic Trades Qualifying Board (
your	application. It is the ap	plicant's responsibilit					documentary proof to be s	
applio	cant upon filing this app	olication.						
			TR	ADE EXPE	RIENCE			
8.							g. Be accurate and detail	ed since this
		verified. If additional RRENT EMPLOYER		ed please us	e back of t	this page.		
	•	•	,				i e	DATE
	8a Company	Street	City	State	Zip		FROM: Month/Yr	. TO: Month/Yr.
							8c	8d
ī	8b n what capacity did you	ı work, or what did yo	ou do?					
	8e							
	Company	Street	City	State	Zip			
	8f						8g	8h
Ī	n what capacity did you	ı work, or what did ye	ou do?					
	8i							
	Company	Street	City	State	Zip		8k	81
_	8j						OK	Oi
Ī	n what capacity did you	u work, or what did yo	ou do?					
				2				1
				3				

Name ______Social Security No. _____1b_____

	8m							D FROM: Month/Yr.	ATE TO: Month/Yr
	Company	Street	City	State	Zip			TROWN WIGHTINTS	TO. MOHUI/TI
	8n							80	8p
I	n what capacity did yo	u work, or what did you	do?						
	8g								
	Company	Street	City	State	Zip			0-	04
	8r							8s	8t
I	n what capacity did you	u work, or what did you	do?						
	8u								
	Company	Street	City	State	Zip			8w	8x
_	8v								
II	n what capacity did you	u work, or what did you	do?						
				EDUCATION	ON				
9.	Please provide the	following information ab	out your e	ducational bac	kground.				
HIGH	SCHOOL9a_					City	9b	State _9c `	Year9d
		tion Degree (GED)							
		IOOL9i							
COLL	.EGE9m					City	9n	State _9o	_Year9p
DEGF	REE TITLE9q	I	Year Ob	otained9r					
POS1	GRADUATE	_9s				City _	9t	State9u_	Year9v
OTHE	R SCHOOLING (Milita	ary Service or other)	9w						
02		<u></u>							
LIST	RELEVANT SCHOOL	COURSES TAKEN	9x						
	NOUDEO O								
LICEI	NSURES9y								
			FUTU	RE BUSINES	SS INTEN	IT			
		(Not applica	able to Jou	rneyman and N	Maintenand	ceman ap	olicants)		
10.	Do you intend to go business you may	o into business or to qua be interested in applying	alify a comp g for:	pany? Yes _10	0a No _^	10b if y	es, please	indicate below which	n type of
	_	_10c Sole Proprietorship)	_10d Partner	ship	_10e	Corporation	n/Other Business En	tity

If you indicated above intent to later obtain a contractor's business certificate, the applicable forms will be forwarded to you once your personal certification application has been approved.

RESUME OF APPLICANT'S EXPERIENCE

In order for the CTQB to properly assess your experience in terms of authorized scope of work categories listed in Chapter 10 of the Code of Miami-Dade County, it is required that you complete this resume.

11. PLEASE EXPLAIN IN DETAIL THE WORK YOU HAVE PERFORMED IN THE FIELD IN CONJUNCTION WITH THE CATEGORY IN WHICH YOU ARE REQUESTING TO BE CERTIFIED. IN ADDITION, HIGHLIGHT THOSE JOBS THAT BEST DEMONSTRATE THE SKILLS REQUIRED FOR THE APPLICABLE TRADE.

(ATTACH ADDITIONAL SHEET IF NECESSARY)

I certify that the above described work and experience recorded represents to the best of my knowledge all information relative to the scope of work and category for which I am applying for. I further certify that all supporting documentation submitted with this application is true and accurate. I understand that an issuance of a personal certificate does not permit me to act as a contractor in the trade concerned and in order to work in the trade I must be employed by a licensed contractor. I realize that if I do contract without a contractor's business certificate of competency, I will face the possibility of receiving a fine of up to \$5,000 on each count and my personal certificate could be suspended or revoked by the Miami-Dade County Construction Trades Qualifying Board. I understand that refunds may be granted only for exam categories under specific circumstances outlined in Section 10-23 of the Code of Miami-Dade County and include a non-refundable process fee of \$80.

		X
STATE OF		Applicant's Signature
	The foregoing instrument was acknowledged before me this	day of ,
20 , by _		, who is personally known to me or who has
produced a	as identifi	cation and who did / did not take an oath.
	NOTARY PUBLIC	